



**SEPTEMBER 2005 MONTHLY REPORT**  
**(Updated February 2006)**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.  
September 2005 Monthly Report - Updated February 2006

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN  
MONTHLY STATISTICS FOR SEPTEMBER 2005 MONTH END  
EXECUTIVE SUMMARY**

	Sep 2005*	March 2005
Bank Summary		
Checkwrite	\$7,998,086.90	\$5,389,992.61
Book Balance (US Bank & State General Account)	\$48,788,689.00	\$53,789,891.00
Enrollment		
Plan 1A	7,743	7,722
Plan 1B	9,659	9,294
Plan 2	1,648	1,709
Total	19,050	18,725
New Applications Received	713	461
Claims		
Claims Processed	108,474	91,585
Average Processing Days	5.27	12.00
Claim Inventory - Over 30 Days Old	895	0
Claim Inventory - Total	5,029	0
Claims Denied (NonPBM)	7,987	7,634
Claims Denied (PBM)	15,659	8,304
Claim Accuracy Performance	98.85%	100.00%
Customer Service/Policyholder Services		
Number of Calls Received	12065	13,363
Percentage of Calls Answered	99.00%	88.50%
Written Correspondence - Received	181	170
Written Correspondence - Completed	179	202
Written Correspondence - Inventory	22	0
Average Hold Time for Telephone Calls	0.20	4.57

**\*Please note: Due to the transition of HIRSP plan administration services to a new contractor effective April 1, 2005 claims volumes, payments and other operational statistics may be accounted for differently. Care should be used when trying to compare data from prior to April 1, 2005 to data from April 1, 2005 going forward.**

**Also note that adjustments as reported by the previous administrator are no longer being counted in reports found on pages 26, 27 and 28 beginning with April 2005 data.**

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN  
SEPTEMBER 2005 MONTHLY REPORT  
TABLE OF CONTENTS**

**FINANCIAL REPORTS**

BREAKDOWN OF INCURRED CLAIMS AND EARNED PREMIUM .....	1
FINANCIAL REPORT NOTES .....	2-3
FISCAL YEAR UNAUDITED STATEMENT OF REVENUES, EXPENSES AND CHANGES IN RETAINED EARNINGS .....	4
FISCAL YEAR DETAIL OF MISCELLANEOUS REVENUE & ADMIN. EXPENSE .....	5
FISCAL YEAR INTERIM RECONCILIATION .....	6-7
FISCAL YEAR UNAUDITED BALANCE SHEETS.....	8
PROVIDER CONTRIBUTION REPORT .....	9
CALENDAR YEAR UNAUDITED STATEMENT OF REVENUES, EXPENSES & CHANGES IN RETAINED EARNINGS .....	10
CALENDAR YEAR DETAIL OF MISCELLANEOUS REVENUE & ADMIN. EXPENSES .....	11
CALENDAR YEAR INTERIM RECONCILIATION .....	12-13
CALENDAR YEAR UNAUDITED BALANCE SHEET .....	14
EARNED PREMIUM REPORT .....	15
ASSESSMENT REPORT .....	16

**POLICYHOLDER ACTIVITY REPORTS**

APPLICANT ACTIVITY .....	17
APPLICANT ELIGIBILITY DETERMINATION.....	18
TOTAL POLICIES & SUBSIDIZED POLICIES IN FORCE.....	19
TOTAL POLICIES IN FORCE BY PLAN, GENDER & AGE GROUP.....	20
TOTAL POLICIES IN FORCE BY PLAN, GENDER, ZONE & AGE GROUP .....	21-23
TOTAL SUBSIDY/NON-SUBSIDY .....	24
CUSTOMER SERVICE OPERATING REPORT .....	25
CLAIMS PROCESSED REPORT .....	26
AVERAGE CLAIM DAYS TO PROCESS REPORT.....	27
CLAIMS INVENTORY REPORT .....	28
CLAIMS DENIED REPORT .....	29
PBM CLAIMS DENIED REPORT .....	30
CLAIMS ACCURACY REPORT.....	31
APPEALS AND GRIEVANCE SUMMARY .....	32

<b>4Q03</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurring Claims	Earned Premium	Loss Ratio	Incurring Claims	Earned Premium
Plan 1A	\$22,755,658	\$10,825,220	210.2%	\$894.34	\$425.45
Plan 1B	9,585,581	8,013,666	119.6%	436.24	364.71
Plan 2	4,472,245	2,062,818	216.8%	858.56	396.01
Total	\$36,813,484	\$20,901,704	176.1%	\$699.53	\$397.17
<b>1Q04</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurring Claims	Earned Premium	Loss Ratio	Incurring Claims	Earned Premium
Plan 1A	\$19,688,284	\$10,273,986	191.6%	\$802.36	\$418.70
Plan 1B	9,728,943	8,769,984	110.9%	404.40	364.54
Plan 2	3,991,381	2,060,924	193.7%	763.61	394.28
Total	\$33,408,609	\$21,104,894	158.3%	\$620.71	\$392.12
<b>2Q04</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurring Claims	Earned Premium	Loss Ratio	Incurring Claims	Earned Premium
Plan 1A	\$21,923,781	\$10,446,926	209.9%	\$875.83	\$417.34
Plan 1B	11,149,215	9,078,492	122.8%	447.47	364.36
Plan 2	4,689,568	2,092,994	224.1%	892.06	398.13
Total	\$37,762,564	\$21,618,413	174.7%	\$684.04	\$391.60
<b>3Q04</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurring Claims	Earned Premium	Loss Ratio	Incurring Claims	Earned Premium
Plan 1A	\$21,167,603	\$11,627,516	182.0%	\$857.30	\$470.92
Plan 1B	11,462,876	10,348,024	110.8%	453.98	409.82
Plan 2	4,803,300	2,438,376	197.0%	924.96	469.55
Total	\$37,433,779	\$24,413,917	153.3%	\$678.96	\$442.81
<b>4Q04</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurring Claims	Earned Premium	Loss Ratio	Incurring Claims	Earned Premium
Plan 1A	\$25,319,831	\$11,459,604	220.9%	\$1,037.61	\$469.62
Plan 1B	14,542,339	10,461,572	139.0%	568.66	409.09
Plan 2	5,108,171	2,436,761	209.6%	986.32	470.51
Total	\$44,970,341	\$24,357,937	184.6%	\$815.36	\$441.64
<b>1Q05</b>					
Plan	Total Dollars			Per Member Per Month	
	Incurring Claims	Earned Premium	Loss Ratio	Incurring Claims	Earned Premium
Plan 1A	\$22,354,900	\$10,770,000	207.6%	\$964.03	\$464.44
Plan 1B	12,414,834	11,328,000	109.6%	443.42	404.60
Plan 2	4,452,028	2,380,000	187.1%	870.39	465.30
Total	\$39,221,762	\$24,478,000	160.2%	\$696.63	\$434.76

NOTES: Loss Ratio = Incurred Claims / Earned Premiums  
Earned Premium includes Premium Subsidies  
Incurred Claims include Provider Contributions  
Administrative Expenses are not included in this exhibit  
Incurred Claims and Earned Premiums are updated quarterly and restated to reflect  
the most current information available as of June 30, 2005

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan  
Financial Report Notes  
For the Period Ending September 30, 2005**

The motions adopted by the HIRSP Board of Governors regarding changes are summarized as follows:

- 1) Convene the Actuarial Advisory Subcommittee for the purpose of advising the FOC and Board regarding a market-based benchmark for program costs for use in establishing the SFY06 Budget.
- 2) The Board acknowledges that the current problem of the growing provider contribution and program costs is a function of several factors including increasing provider charges and provider payment rates not keeping pace with inflation. The Board acknowledges that the above referenced motion is an interim solution and would have recommended a 5% provider payment increase effective March 1, 2005 if not for administrative issues associated with the April 1, 2005 transition of plan administrators. The Board will reduce the SFY06 provider surplus by \$1.5 million to compensate for not changing the provider payment rate effective April 1, 2005.

**Wisconsin Health Insurance Risk Sharing Plan  
Financial Report Notes  
For the Period Ending September 30, 2005**

These monthly reports do not include the June 30, 2002 CAFR<sup>1</sup> (Combined Annual Financial Report) adjustments. When these adjustments are available, the monthly report will reflect these changes. Previously issued monthly reports will not be reissued but the financial statement notes for the current month will summarize the CAFR adjustment.

- 1) **Policyholder Retained Earnings, End of Period (page 3 & 9)**  
The policyholder retained earnings include both assigned and unassigned surplus (see Interim Reconciliation page 6 and 12 for the breakdown)
- 2) **Other Receivables (page 7 & 13)**  
Claims expense and receivables are adjusted monthly to account for doubtful receivables per GASB 38.
- 3) **Losses Paid or Approved for Payment (page 3 & 9)**  
Claims expense and receivables are adjusted monthly to account for doubtful receivables per GASB 38.

---

<sup>1</sup> CAFR is the State of Wisconsin annual financial report published by DOA (Dept. of Admin.) and prepared in accordance with GASB (Governmental Accounting Standards Board).

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

Wisconsin Health Insurance Risk Sharing Plan  
for the Period Ended September 30, 2005  
Fiscal Year 2006

**Unaudited Statement of Revenues, Expenses, and Changes in Retained Earnings**

<b>Operating Revenues</b>	<b>Jul</b>	<b>Aug</b>	<b>Sep</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>	<b>Year to Date</b>
Gross Premiums	8,889,521	9,430,635	9,919,154	-	-	-	-	-	-	-	-	-	28,239,310
Premium Subsidized	(414,793)	(418,017)	(414,408)	-	-	-	-	-	-	-	-	-	(1,247,218)
Net Premium Revenues	8,474,728	9,012,618	9,504,746	-	-	-	-	-	-	-	-	-	26,992,092
Provider Contribution	2,478,376	2,208,753	3,387,625	-	-	-	-	-	-	-	-	-	8,074,754
Insurer Assessments	3,239,924	3,239,924	3,239,924	-	-	-	-	-	-	-	-	-	9,719,772
<b>Total Operating Revenues</b>	<b>14,193,028</b>	<b>14,461,295</b>	<b>16,132,295</b>	-	-	-	-	-	-	-	-	-	<b>44,786,618</b>
<b>Operating Expenses</b>													
Medical Losses:													
Losses Paid or Approved for Payment <sup>(3)</sup>	8,968,093	12,415,734	10,649,147	-	-	-	-	-	-	-	-	-	32,032,974
Increase (Decrease) in Unpaid Losses	346,665	(1,528,617)	1,786,574	-	-	-	-	-	-	-	-	-	604,622
Deductible Subsidy Paid	48,493	56,126	47,288	-	-	-	-	-	-	-	-	-	151,907
Total Medical Losses	9,363,251	10,943,243	12,483,009	-	-	-	-	-	-	-	-	-	32,789,503
Pharmacy Losses:													
Losses Paid or Approved for Payment <sup>(4)</sup>	3,648,421	4,235,825	4,011,497	-	-	-	-	-	-	-	-	-	11,895,743
Increase (Decrease) in Unpaid Losses	79,933	(799,220)	422,513	-	-	-	-	-	-	-	-	-	(296,774)
Drug Rebates	(230,293)	(251,764)	(242,022)	-	-	-	-	-	-	-	-	-	(724,079)
Subsidy - Coinsurance Out-of-Pocket Max	33,131	43,341	44,206	-	-	-	-	-	-	-	-	-	120,678
Total Pharmacy Losses	3,531,192	3,228,182	4,236,194	-	-	-	-	-	-	-	-	-	10,995,568
Total Losses	12,894,443	14,171,425	16,719,203	-	-	-	-	-	-	-	-	-	43,785,071
Loss adjustment expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Administrative expenses													
WPS Admin Fees	402,149	403,846	400,577	-	-	-	-	-	-	-	-	-	1,206,572
Navitus Admin Fees	107,223	107,228	104,720	-	-	-	-	-	-	-	-	-	319,171
DHFS Admin Fees	38,244	22,953	33,719	-	-	-	-	-	-	-	-	-	94,916
EDS Admin Fees	-	-	-	-	-	-	-	-	-	-	-	-	-
UGS Admin Fees	-	-	-	-	-	-	-	-	-	-	-	-	-
Milliman USA Actuarial Services	18,329	14,088	8,747	-	-	-	-	-	-	-	-	-	41,164
Other Admin Fees	-	-	8,000	-	-	-	-	-	-	-	-	-	8,000
Total Administrative Expenses	565,945	548,115	555,763	-	-	-	-	-	-	-	-	-	1,669,823
Referral fees	5,390	8,610	6,125	-	-	-	-	-	-	-	-	-	20,125
Total Operating Expenses	13,465,778	14,728,150	17,281,091	-	-	-	-	-	-	-	-	-	45,475,019
<b>Net Operating Income (Loss)</b>	<b>727,250</b>	<b>(266,855)</b>	<b>(1,148,796)</b>	-	-	-	-	-	-	-	-	-	<b>(688,401)</b>
<b>Non-Operating Revenues (Expenses)</b>													
Federal Grant	-	-	-	-	-	-	-	-	-	-	-	-	-
Investment income	122,541	112,533	123,596	-	-	-	-	-	-	-	-	-	358,670
Total Non-operating Revenues (Expenses)	122,541	112,533	123,596	-	-	-	-	-	-	-	-	-	358,670
<b>Net Income (Loss)</b>	<b>849,791</b>	<b>(154,322)</b>	<b>(1,025,200)</b>	-	-	-	-	-	-	-	-	-	<b>(329,731)</b>
<b>Additions to Retained Earnings</b>													
<b>Policyholder</b>													
Retained Earnings, Beginning of Period	9,542,625	10,556,803	11,377,215	-	-	-	-	-	-	-	-	-	9,542,625
Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	1,014,178	820,412	(228,953)	-	-	-	-	-	-	-	-	-	1,605,637
<b>Retained Earnings, End of Period<sup>(1)</sup></b>	<b>10,556,803</b>	<b>11,377,215</b>	<b>11,148,262</b>	-	-	-	-	-	-	-	-	-	<b>11,148,262</b>
<b>Providers</b>													
Retained Earnings, Beginning of Period	(2,718,521)	(3,140,677)	(4,093,896)	-	-	-	-	-	-	-	-	-	(2,718,521)
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(422,156)	(953,219)	(278,526)	-	-	-	-	-	-	-	-	-	(1,653,901)
<b>Retained Earnings, End of Period</b>	<b>(3,140,677)</b>	<b>(4,093,896)</b>	<b>(4,372,422)</b>	-	-	-	-	-	-	-	-	-	<b>(4,372,422)</b>
<b>Insurers</b>													
Retained Earnings, Beginning of Period	3,677,147	4,016,540	4,094,492	-	-	-	-	-	-	-	-	-	3,677,147
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	339,393	77,952	(426,227)	-	-	-	-	-	-	-	-	-	(8,882)
<b>Retained Earnings, End of Period</b>	<b>4,016,540</b>	<b>4,094,492</b>	<b>3,668,265</b>	-	-	-	-	-	-	-	-	-	<b>3,668,265</b>
<b>Unfunded Deductible and Coinsurance Subsidy</b>													
Retained Earnings, Beginning of Period	(1,100,223)	(1,181,847)	(1,281,314)	-	-	-	-	-	-	-	-	-	(1,100,223)
Current Earnings	(81,624)	(99,467)	(91,494)	-	-	-	-	-	-	-	-	-	(272,585)
<b>Retained Earnings, End of Period</b>	<b>(1,181,847)</b>	<b>(1,281,314)</b>	<b>(1,372,808)</b>	-	-	-	-	-	-	-	-	-	<b>(1,372,808)</b>
<b>Total Retained Earnings</b>	<b>10,250,819</b>	<b>10,096,497</b>	<b>9,071,297</b>	-	-	-	-	-	-	-	-	-	<b>9,071,297</b>

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN  
2006 FISCAL YEAR DETAIL OF MISC REVENUE & ADMIN EXPENSES  
AS OF SEPTEMBER 2005**

MISC REVENUE	JUL 05	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	YEAR TO DATE TOTAL
													-
													-
													-
													-
													-
													-
													-
<b>TOTAL MISC REVENUE</b>	-	-	-	-	-	-	-	-	-	-	-	-	-

MISC ADMIN EXP	JUL 05	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	YEAR TO DATE TOTAL
LAB Audit Fee			7,500.00										7,500.00
NASCHIP			500.00										500.00
													-
													-
													-
													-
													-
													-
													-
													-
													-
													-
													-
													-
<b>TOTAL MISC ADMIN EXP</b>	-	-	8,000.00	-	-	-	-	-	-	-	-	-	8,000.00

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.



**Wisconsin Health Insurance Risk Sharing Plan  
Fiscal Year 2006 Interim Reconciliation  
As Of September 30, 2005**

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Year to Date
<b>1. Operating and Administrative Costs under s.149.143(1)</b>													
Medical Losses Paid or Approved for Payment	8,968,093	12,415,734	10,649,147	-	-	-	-	-	-	-	-	-	32,032,974
Increase (Decrease) in Unpaid Medical Losses	346,665	(1,528,617)	1,786,574	-	-	-	-	-	-	-	-	-	604,622
Pharmacy Losses Paid or Approved for Payment	3,648,421	4,235,825	4,011,497	-	-	-	-	-	-	-	-	-	11,895,743
Increase (Decrease) in Unpaid Pharmacy Losses	79,933	(799,220)	422,513	-	-	-	-	-	-	-	-	-	(296,774)
Drug Rebates	(230,293)	(251,764)	(242,022)	-	-	-	-	-	-	-	-	-	(724,079)
Total Administrative Expenses	571,335	556,725	561,888	-	-	-	-	-	-	-	-	-	1,689,948
Loss Adjustment Expense	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Operating Expense	13,384,154	14,628,683	17,189,597	-	-	-	-	-	-	-	-	-	45,202,434
<b>2. Adjustments to Operating and Administrative Costs</b>													
Total Non-operating Revenue (Expense)	122,541	112,533	123,596	-	-	-	-	-	-	-	-	-	358,670
<b>3. Total Fiscal Year Program Costs to be Split 60% 20% 20%</b>	13,261,613	14,516,150	17,066,001	-	-	-	-	-	-	-	-	-	44,843,764
<b>4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Excluding Subsidy Costs)</b>													
Funding Shares													
60% Policyholders	7,956,967	8,709,690	10,239,601	-	-	-	-	-	-	-	-	-	26,906,258
20% Providers	2,652,323	2,903,230	3,413,200	-	-	-	-	-	-	-	-	-	8,968,753
20% Insurers	2,652,323	2,903,230	3,413,200	-	-	-	-	-	-	-	-	-	8,968,753
<b>5. Subsidy Funding Shares</b>													
Premium subsidies	414,793	418,017	414,408	-	-	-	-	-	-	-	-	-	1,247,218
Deductible Subsidies	48,493	56,126	47,288	-	-	-	-	-	-	-	-	-	151,907
Subsidy - coinsurance out-of-pocket Max	33,131	43,341	44,206	-	-	-	-	-	-	-	-	-	120,678
Total Subsidies	496,417	517,484	505,902	-	-	-	-	-	-	-	-	-	1,519,803
Subsidy Funding Needed by Source in addition to Section 3 Funding Shares													
Providers	248,209	258,742	252,951	-	-	-	-	-	-	-	-	-	759,902
Insurers	248,208	258,742	252,951	-	-	-	-	-	-	-	-	-	759,901
<b>6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Including Subsidy Costs)</b>													
Policyholders	7,956,967	8,709,690	10,239,601	-	-	-	-	-	-	-	-	-	26,906,258
Providers	2,900,532	3,161,972	3,666,151	-	-	-	-	-	-	-	-	-	9,728,655
Insurers	2,900,531	3,161,972	3,666,151	-	-	-	-	-	-	-	-	-	9,728,654
<b>7. Non-GPR Revenues by Source Including GPR Subsidies Under s.20.435(4)(ah)</b>													
Policyholders													
Premium	8,474,728	9,012,618	9,504,746	-	-	-	-	-	-	-	-	-	26,992,092
Premium and Deductible Subsidies Credited to Policyholders	496,417	517,484	505,902	-	-	-	-	-	-	-	-	-	1,519,803
Subtotal	8,971,145	9,530,102	10,010,648	-	-	-	-	-	-	-	-	-	28,511,895
Providers	2,478,376	2,208,753	3,387,625	-	-	-	-	-	-	-	-	-	8,074,754
Insurers	3,239,924	3,239,924	3,239,924	-	-	-	-	-	-	-	-	-	9,719,772
Total	14,689,445	14,978,779	16,638,197	-	-	-	-	-	-	-	-	-	46,306,421

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

# 8. Interim Estimate of Surplus/(Deficit) Account Balance for FY 2006

## Policyholders

Prior Period Surplus / (Deficit)	9,542,625	10,556,803	11,377,215	-	-	-	-	-	-	-	-	-	9,542,625
Premium (Including Premium and Deductible Subsidies)	8,971,145	9,530,102	10,010,648	-	-	-	-	-	-	-	-	-	28,511,895
Less Cost	7,956,967	8,709,690	10,239,601	-	-	-	-	-	-	-	-	-	26,906,258
Less Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	1,014,178	820,412	(228,953)	-	-	-	-	-	-	-	-	-	1,605,637
Ending Surplus / (Deficit)	10,556,803	11,377,215	11,148,262	-	-	-	-	-	-	-	-	-	11,148,262
Assigned Surplus to SFY 2006	-	-	-	-	-	-	-	-	-	-	-	-	-
Unassigned Surplus	10,556,803	11,377,215	11,148,262	-	-	-	-	-	-	-	-	-	11,148,262

## Providers

Prior Period Surplus / (Deficit)	(2,718,521)	(3,140,677)	(4,093,896)	-	-	-	-	-	-	-	-	-	(2,718,521)
Contribution	2,478,376	2,208,753	3,387,625	-	-	-	-	-	-	-	-	-	8,074,754
Less Cost	2,900,532	3,161,972	3,666,151	-	-	-	-	-	-	-	-	-	9,728,655
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(422,156)	(953,219)	(278,526)	-	-	-	-	-	-	-	-	-	(1,653,901)
Ending Surplus / (Deficit)	(3,140,677)	(4,093,896)	(4,372,422)	-	-	-	-	-	-	-	-	-	(4,372,422)

## Insurers

Prior Period Surplus / (Deficit)	3,677,147	4,016,540	4,094,492	-	-	-	-	-	-	-	-	-	3,677,147
Assessment	3,239,924	3,239,924	3,239,924	-	-	-	-	-	-	-	-	-	9,719,772
Less Cost	2,900,531	3,161,972	3,666,151	-	-	-	-	-	-	-	-	-	9,728,654
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	339,393	77,952	(426,227)	-	-	-	-	-	-	-	-	-	(8,882)
Ending Surplus / (Deficit)	4,016,540	4,094,492	3,668,265	-	-	-	-	-	-	-	-	-	3,668,265

## Unfunded Deductible and Coinsurance Subsidy

Prior Period Surplus / (Deficit)	(1,100,223)	(1,181,847)	(1,281,314)	-	-	-	-	-	-	-	-	-	(1,100,223)
Monthly Change	(81,624)	(99,467)	(91,494)	-	-	-	-	-	-	-	-	-	(272,585)
Ending Surplus / (Deficit)	(1,181,847)	(1,281,314)	(1,372,808)	-	-	-	-	-	-	-	-	-	(1,372,808)

Total HIRSP Retained Earnings	10,250,819	10,096,497	9,071,297	-	-	-	-	-	-	-	-	-	9,071,297
-------------------------------	------------	------------	-----------	---	---	---	---	---	---	---	---	---	-----------

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

Wisconsin Health Insurance Risk Sharing Plan  
September 30, 2005  
Fiscal Year 2006

Unaudited Balance Sheet

Assets	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Cash and Cash Equivalents	44,046,067	41,252,806	48,788,689	-	-	-	-	-	-	-	-	-
Other Receivables <sup>(2)</sup>	629,508	448,884	767,911	-	-	-	-	-	-	-	-	-
Drug Rebates Receivable	1,816,840	1,652,849	1,894,871	-	-	-	-	-	-	-	-	-
Assessments Receivable	38,902,416	30,923,047	27,539,749	-	-	-	-	-	-	-	-	-
Prepaid Items	-	-	-	-	-	-	-	-	-	-	-	-
<b>Total Assets</b>	<b>85,394,831</b>	<b>74,277,586</b>	<b>78,991,220</b>	-	-	-	-	-	-	-	-	-
Liabilities and Fund Equity												
Liabilities:												
Unpaid Medical Loss Liabilities	20,350,824	19,170,425	20,550,019	-	-	-	-	-	-	-	-	-
Unpaid Prescription Drug Loss Liabilities	2,904,436	2,491,878	2,722,729	-	-	-	-	-	-	-	-	-
Unpaid Loss Adjustment Expense	660,000	660,000	660,000	-	-	-	-	-	-	-	-	-
Unearned Premiums	15,112,758	9,058,807	16,354,912	-	-	-	-	-	-	-	-	-
Unearned Assessments	35,639,168	32,403,320	29,163,396	-	-	-	-	-	-	-	-	-
Accounts Payable and Other Accrued Liabilities	476,826	396,659	468,867	-	-	-	-	-	-	-	-	-
<b>Total Liabilities</b>	<b>75,144,012</b>	<b>64,181,089</b>	<b>69,919,923</b>	-	-	-	-	-	-	-	-	-
Fund Equity:												
Policyholder	10,556,803	11,377,215	11,148,262	-	-	-	-	-	-	-	-	-
Providers	(3,140,677)	(4,093,896)	(4,372,422)	-	-	-	-	-	-	-	-	-
Insurers	4,016,540	4,094,492	3,668,265	-	-	-	-	-	-	-	-	-
Unfunded Deductible and Coinsurance Subsidy	(1,181,847)	(1,281,314)	(1,372,808)	-	-	-	-	-	-	-	-	-
<b>Total Retained Earnings</b>	<b>10,250,819</b>	<b>10,096,497</b>	<b>9,071,297</b>	-	-	-	-	-	-	-	-	-
<b>Total Liabilities and Fund Equity</b>	<b>85,394,831</b>	<b>74,277,586</b>	<b>78,991,220</b>	-	-	-	-	-	-	-	-	-

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN  
MONTHLY PROVIDER CONTRIBUTION REPORT  
AS OF SEPTEMBER 2005 MONTH END (9/28/2005)**

Provider Share Calculation for the Current Month - Claims by Claim Type					
Regular Claims					
Claim Type	Billed Charges	UUCP Percentage	Usual and Customary	Less HIRSP Allowed Charges	Provider Share
Professional	\$ 7,128,959.23	36.0%	\$ 4,566,098.39	\$ 3,116,707.97	\$ 1,449,390.42
Hospital Outpatient	\$ 3,833,083.03	27.5%	\$ 2,780,441.77	\$ 2,423,420.29	\$ 357,021.48
Hospital Inpatient	\$ 4,420,652.69	28.1%	\$ 3,178,007.22	\$ 2,504,117.68	\$ 673,889.54
Nursing Home	\$ 39,733.16	23.9%	\$ 30,244.88	\$ 36,088.81	\$ (5,843.93)
Other	\$ 814,668.51	23.9%	\$ 620,125.67	\$ 558,342.41	\$ 61,783.26
Total	\$ 16,237,096.62		\$ 11,174,917.93	\$ 8,638,677.16	\$ 2,536,240.77

Crossover Claims					
Claim Type	Medicare Allowed Charges	Medicare Paid	HIRSP Paid	HIRSP Deductible/ Coinsurance	Provider Share
Professional	\$ 638,484.01	\$ 391,196.60	\$ 211,736.50	\$ 16,331.34	\$ 19,219.57
Hospital Outpatient	\$ 631,219.03	\$ 471,121.98	\$ 149,520.14	\$ 10,711.58	\$ (134.67)
Hospital Inpatient	\$ 990,953.50	\$ 861,910.19	\$ 117,745.59	\$ 1,714.43	\$ 9,583.29
Nursing Home	\$ 44,188.77	\$ 34,261.33	\$ 10,269.20	\$ 152.20	\$ (493.96)
Other	\$ 275,927.75	\$ 168,920.90	\$ 92,301.46	\$ 5,455.68	\$ 9,249.71
Total	\$ 2,580,773.06	\$ 1,927,411.00	\$ 581,572.89	\$ 34,365.23	\$ 37,423.94

Provider Contribution on the Increase (Decrease) in Unpaid Losses	\$ 406,980.00
---	---------------

Total Provider Contribution Non-Pharmacy	\$ 2,980,644.71
--	-----------------

Pharmacy Claims					
Claim Type	Billed Charges	UUCP Percentage	Usual and Customary	Less HIRSP Allowed Charges	Provider Share
Prescription Drug not processed by PBM	\$ -	0.0%			\$ -
Prescription Drug processed by PBM	\$ 6,104,443.61	0.0%	\$ 4,474,431.48	\$ 4,474,431.48	\$ -
Total Provider Contribution Pharmacy	\$ 6,104,443.61		\$ 4,474,431.48	\$ 4,474,431.48	\$ -

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan  
for the Period Ended September 30, 2005  
Calendar Year 2005**

Unaudited Statement of Revenues, Expenses, and Changes in Retained Earnings													
Operating Revenues	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
Gross Premiums	8,239,786	8,033,854	8,203,838	8,038,869	7,720,822	8,114,062	8,889,521	9,430,635	9,919,154	-	-	-	76,590,541
Premium Subsidized	(354,700)	(328,871)	(306,815)	(348,067)	(353,231)	(352,175)	(414,793)	(418,017)	(414,408)	-	-	-	(3,291,077)
Net Premium Revenues	7,885,086	7,704,983	7,897,023	7,690,802	7,367,591	7,761,887	8,474,728	9,012,618	9,504,746	-	-	-	73,299,464
Provider Contribution	2,255,043	2,337,067	2,372,221	3,005,828	3,080,184	2,840,456	2,478,376	2,208,753	3,387,625	-	-	-	23,965,553
Insurer Assessments	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	3,239,924	3,239,924	3,239,924	-	-	-	26,017,866
Total Operating Revenues	12,856,478	12,758,399	12,985,593	13,412,979	13,164,124	13,318,692	14,193,028	14,461,295	16,132,295	-	-	-	123,282,883
Operating Expenses													
Medical Losses:													
Losses Paid or Approved for Payment <sup>(3)</sup>	8,738,080	8,587,330	6,994,408	5,477,768	10,674,619	14,219,985	8,968,093	12,415,734	10,649,147	-	-	-	86,725,164
Increase (Decrease) in Unpaid Losses	(1,174,533)	(984,629)	2,012,472	4,796,581	(459,178)	(1,928,757)	346,665	(1,528,617)	1,786,574	-	-	-	2,866,578
Deductible Subsidy Paid	59,708	78,706	29,706	53,990	95,684	78,118	48,493	56,126	47,288	-	-	-	547,819
Total Medical Losses	7,623,255	7,681,407	9,036,586	10,328,339	10,311,125	12,369,346	9,363,251	10,943,243	12,483,009	-	-	-	90,139,561
Pharmacy Losses:													
Losses Paid or Approved for Payment	3,656,006	3,495,680	5,402,192	4,013,268	3,757,404	4,167,950	3,648,421	4,235,825	4,011,497	-	-	-	36,388,243
Increase (Decrease) in Unpaid Losses	(178,275)	116,814	(1,607,836)	139,289	154,789	34,714	79,933	(799,220)	422,513	-	-	-	(1,637,279)
Drug Rebates	(122,005)	(120,325)	(230,445)	(214,496)	(234,320)	(242,166)	(230,293)	(251,764)	(242,022)	-	-	-	(1,887,836)
Subsidy - Coinsurance Out-of-Pocket Max	12,515	12,515	(8,892)	12,663	22,609	30,369	33,131	43,341	44,206	-	-	-	202,457
Total Pharmacy Losses	3,368,241	3,504,684	3,555,019	3,950,724	3,700,482	3,990,867	3,531,192	3,228,182	4,236,194	-	-	-	33,065,585
Total Losses	10,991,496	11,186,091	12,591,605	14,279,063	14,011,607	16,360,213	12,894,443	14,171,425	16,719,203	-	-	-	123,205,146
Loss adjustment expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Administrative expenses													
WPS Admin Fees	-	-	-	380,950	390,487	593,501	402,149	403,846	400,577	-	-	-	2,571,510
Navitus Admin Fees	-	-	-	103,263	105,375	106,618	107,223	107,228	104,720	-	-	-	634,427
DHFS Admin Fees	23,186	37,147	50,352	18,876	50,258	80,383	38,244	22,953	33,719	-	-	-	355,118
EDS Admin Fees	76,867	75,812	74,950	(182)	6,974	-	-	-	-	-	-	-	234,421
UGS Admin Fees	239,028	241,709	244,304	-	12,500	250	-	-	-	-	-	-	737,791
Milliman USA Actuarial Services	22,888	54,942	25,797	35,041	29,084	19,242	18,329	14,088	8,747	-	-	-	228,158
Other Admin Fees	18,597	12,287	26,803	3,570	5,810	5,567	-	-	8,000	-	-	-	80,634
Total Administrative Expenses	380,566	421,897	422,206	541,518	600,488	805,561	565,945	548,115	555,763	-	-	-	4,842,059
Referral fees	7,035	4,607	7,455	9,380	4,725	(665)	5,390	8,610	6,125	-	-	-	52,662
Total Operating Expenses	11,379,097	11,612,595	13,021,266	14,829,961	14,616,820	17,165,109	13,465,778	14,728,150	17,281,091	-	-	-	128,099,867
Net Operating Income (Loss)	1,477,381	1,145,804	(35,673)	(1,416,982)	(1,452,696)	(3,846,417)	727,250	(266,855)	(1,148,796)	-	-	-	(4,816,984)
Non-Operating Revenues (Expenses)													
Federal Grant	-	-	-	-	-	-	-	-	-	-	-	-	-
Investment income	79,968	67,563	92,323	118,962	125,449	104,607	122,541	112,533	123,596	-	-	-	947,542
Total Non-operating Revenues (Expenses)	79,968	67,563	92,323	118,962	125,449	104,607	122,541	112,533	123,596	-	-	-	947,542
Net Income (Loss)	1,557,349	1,213,367	56,650	(1,298,020)	(1,327,247)	(3,741,810)	849,791	(154,322)	(1,025,200)	-	-	-	(3,869,442)
Additions to Retained Earnings													
Policyholder													
Retained Earnings, Beginning of Period	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	10,556,803	11,377,215	-	-	-	9,648,674
Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	1,575,865	1,252,788	479,775	(681,086)	(784,731)	(1,948,660)	1,014,178	820,412	(228,953)	-	-	-	1,499,588
Retained Earnings, End of Period <sup>(1)</sup>	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	10,556,803	11,377,215	11,148,262	-	-	-	11,148,262
Providers													
Retained Earnings, Beginning of Period	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	(2,718,521)	(3,140,677)	(4,093,896)	-	-	-	(1,036,887)
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(203,800)	(163,741)	(373,220)	(130,401)	(30,194)	(780,278)	(422,156)	(953,219)	(278,526)	-	-	-	(3,335,535)
Retained Earnings, End of Period	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	(2,718,521)	(3,140,677)	(4,093,896)	(4,372,422)	-	-	-	(4,372,422)
Insurers													
Retained Earnings, Beginning of Period	4,951,484	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	3,677,147	4,016,540	4,094,492	-	-	-	4,951,484
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	257,507	215,541	(29,091)	(419,880)	(394,029)	(904,385)	339,393	77,952	(426,227)	-	-	-	(1,283,219)
Retained Earnings, End of Period	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	3,677,147	4,016,540	4,094,492	3,668,265	-	-	-	3,668,265
Unfunded Deductible and Coinsurance Subsidy													
Retained Earnings, Beginning of Period	(622,532)	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(1,100,223)	(1,181,847)	(1,281,314)	-	-	-	(622,532)
Current Earnings	(72,223)	(91,221)	(20,814)	(66,653)	(118,293)	(108,487)	(81,624)	(99,467)	(91,494)	-	-	-	(750,276)
Retained Earnings, End of Period	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(1,100,223)	(1,181,847)	(1,281,314)	(1,372,808)	-	-	-	(1,372,808)
Total Retained Earnings	14,498,088	15,711,455	15,768,105	14,470,085	13,142,838	9,401,028	10,250,819	10,096,497	9,071,297	-	-	-	9,071,297

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN**  
**2005 CALENDAR YEAR DETAIL OF MISC REVENUE & ADMIN EXPENSES**  
**AS OF SEPTEMBER 2005**

MISC REVENUE	JAN 05	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YEAR TO DATE TOTAL
													-
													-
													-
													-
													-
													-
													-
<b>TOTAL MISC REVENUE</b>	-	-	-	-	-	-	-	-	-	-	-	-	-

MISC ADMIN EXP	JAN 05	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YEAR TO DATE TOTAL
Bank Service Charge													-
Postage	16,896.89	10,586.78	25,102.79										52,586.46
LAB Audit Fee	1,700.00	1,700.00	1,700.00	2,900.00	5,800.00				7,500.00				21,300.00
Speed Scribe													-
UW Extension													-
NASCHIP									500.00				500.00
Legal Services													-
Prest & Assoc-Ind Med Review													-
Independent Review				600.00									600.00
Premium Refund Overdraft Fees				70.00	10.00								80.00
Whyte Hirschboeck Dudek, SC						5,567.08							5,567.08
													-
													-
													-
													-
<b>TOTAL MISC ADMIN EXP</b>	<b>18,596.89</b>	<b>12,286.78</b>	<b>26,802.79</b>	<b>3,570.00</b>	<b>5,810.00</b>	<b>5,567.08</b>	-	-	<b>8,000.00</b>	-	-	-	<b>80,633.54</b>

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan  
Calendar Year 2005 Interim Reconciliation  
As Of September 30, 2005**

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
<b>1. Operating and Administrative Costs under s.149.143(1)</b>													
Medical Losses Paid or Approved for Payment	8,738,080	8,587,330	6,994,408	5,477,768	10,674,619	14,219,985	8,968,093	12,415,734	10,649,147	-	-	-	86,725,164
Increase (Decrease) in Unpaid Medical Losses	(1,174,533)	(984,629)	2,012,472	4,796,581	(459,178)	(1,928,757)	346,665	(1,528,617)	1,786,574	-	-	-	2,866,578
Pharmacy Losses Paid or Approved for Payment	3,656,006	3,495,680	5,402,192	4,013,268	3,757,404	4,167,950	3,648,421	4,235,825	4,011,497	-	-	-	36,388,243
Increase (Decrease) in Unpaid Pharmacy Losses	(178,275)	116,814	(1,607,836)	139,289	154,789	34,714	79,933	(799,220)	422,513	-	-	-	(1,637,279)
Drug Rebates	(122,005)	(120,325)	(230,445)	(214,496)	(234,320)	(242,166)	(230,293)	(251,764)	(242,022)	-	-	-	(1,887,836)
Total Administrative Expenses	387,601	426,504	429,661	550,898	605,213	804,896	571,335	556,725	561,888	-	-	-	4,894,721
Loss Adjustment Expense	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Operating Expense	11,306,874	11,521,374	13,000,452	14,763,308	14,498,527	17,056,622	13,384,154	14,628,683	17,189,597	-	-	-	127,349,591
<b>2. Adjustments to Operating and Administrative Costs</b>													
Total Non-operating Revenue (Expense)	79,968	67,563	92,323	118,962	125,449	104,607	122,541	112,533	123,596	-	-	-	947,542
<b>3. Total Fiscal Year Program Costs to be Split 60% 20% 20%</b>	11,226,906	11,453,811	12,908,129	14,644,346	14,373,078	16,952,015	13,261,613	14,516,150	17,066,001	-	-	-	126,402,049
<b>4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Excluding Subsidy Costs)</b>													
Funding Shares													
60% Policyholders	6,736,144	6,872,287	7,744,877	8,786,608	8,623,846	10,171,209	7,956,967	8,709,690	10,239,601	-	-	-	75,841,229
20% Providers	2,245,381	2,290,762	2,581,626	2,928,869	2,874,616	3,390,403	2,652,323	2,903,230	3,413,200	-	-	-	25,280,410
20% Insurers	2,245,381	2,290,762	2,581,626	2,928,869	2,874,616	3,390,403	2,652,323	2,903,230	3,413,200	-	-	-	25,280,410
<b>5. Subsidy Funding Shares</b>													
Premium subsidies	354,700	328,871	306,815	348,067	353,231	352,175	414,793	418,017	414,408	-	-	-	3,291,077
Deductible Subsidies	59,708	78,706	29,706	53,990	95,684	78,118	48,493	56,126	47,288	-	-	-	547,819
Subsidy - coinsurance out-of-pocket Max	12,515	12,515	(8,892)	12,663	22,609	30,369	33,131	43,341	44,206	-	-	-	202,457
Total Subsidies	426,923	420,092	327,629	414,720	471,524	460,662	496,417	517,484	505,902	-	-	-	4,041,353
Subsidy Funding Needed by Source in addition to Section 3 Funding Shares													
Providers	213,462	210,046	163,815	207,360	235,762	230,331	248,209	258,742	252,951	-	-	-	2,020,678
Insurers	213,461	210,046	163,814	207,360	235,762	230,331	248,208	258,742	252,951	-	-	-	2,020,675
<b>6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Including Subsidy Costs)</b>													
Policyholders	6,736,144	6,872,287	7,744,877	8,786,608	8,623,846	10,171,209	7,956,967	8,709,690	10,239,601	-	-	-	75,841,229
Providers	2,458,843	2,500,808	2,745,441	3,136,229	3,110,378	3,620,734	2,900,532	3,161,972	3,666,151	-	-	-	27,301,088
Insurers	2,458,842	2,500,808	2,745,440	3,136,229	3,110,378	3,620,734	2,900,531	3,161,972	3,666,151	-	-	-	27,301,085
<b>7. Non-GPR Revenues by Source Including GPR Subsidies Under s.20.435(4)(ah)</b>													
Policyholders													
Premium	7,885,086	7,704,983	7,897,023	7,690,802	7,367,591	7,761,887	8,474,728	9,012,618	9,504,746	-	-	-	73,299,464
Premium and Deductible Subsidies Credited to Policyholders	426,923	420,092	327,629	414,720	471,524	460,662	496,417	517,484	505,902	-	-	-	4,041,353
Subtotal	8,312,009	8,125,075	8,224,652	8,105,522	7,839,115	8,222,549	8,971,145	9,530,102	10,010,648	-	-	-	77,340,817
Providers	2,255,043	2,337,067	2,372,221	3,005,828	3,080,184	2,840,456	2,478,376	2,208,753	3,387,625	-	-	-	23,965,553
Insurers	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	3,239,924	3,239,924	3,239,924	-	-	-	26,017,866
Total	13,283,401	13,178,491	13,313,222	13,827,699	13,635,648	13,779,354	14,689,445	14,978,779	16,638,197	-	-	-	127,324,236

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

## 8. Interim Estimate of Surplus/(Deficit) Account Balance for FY 2005

### Policyholders

Prior Period Surplus / (Deficit)	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	10,556,803	11,377,215	-	-	-	9,648,674
Premium (Including Premium and Deductible Subsidies)	8,312,009	8,125,075	8,224,652	8,105,522	7,839,115	8,222,549	8,971,145	9,530,102	10,010,648	-	-	-	77,340,817
Less Cost	6,736,144	6,872,287	7,744,877	8,786,608	8,623,846	10,171,209	7,956,967	8,709,690	10,239,601	-	-	-	75,841,229
Less Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	1,575,865	1,252,788	479,775	(681,086)	(784,731)	(1,948,660)	1,014,178	820,412	(228,953)	-	-	-	1,499,588
Ending Surplus / (Deficit)	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	10,556,803	11,377,215	11,148,262	-	-	-	11,148,262
Assigned Surplus to SFY 2005	-	-	-	-	-	-	-	-	-	-	-	-	-
Unassigned Surplus	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	10,556,803	11,377,215	11,148,262	-	-	-	11,148,262

### Providers

Prior Period Surplus / (Deficit)	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	(2,718,521)	(3,140,677)	(4,093,896)	-	-	-	(1,036,887)
Contribution	2,255,043	2,337,067	2,372,221	3,005,828	3,080,184	2,840,456	2,478,376	2,208,753	3,387,625	-	-	-	23,965,553
Less Cost	2,458,843	2,500,808	2,745,441	3,136,229	3,110,378	3,620,734	2,900,532	3,161,972	3,666,151	-	-	-	27,301,088
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(203,800)	(163,741)	(373,220)	(130,401)	(30,194)	(780,278)	(422,156)	(953,219)	(278,526)	-	-	-	(3,335,535)
Ending Surplus / (Deficit)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	(2,718,521)	(3,140,677)	(4,093,896)	(4,372,422)	-	-	-	(4,372,422)

### Insurers

Prior Period Surplus / (Deficit)	4,951,484	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	3,677,147	4,016,540	4,094,492	-	-	-	4,951,484
Assessment	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	3,239,924	3,239,924	3,239,924	-	-	-	26,017,866
Less Cost	2,458,842	2,500,808	2,745,440	3,136,229	3,110,378	3,620,734	2,900,531	3,161,972	3,666,151	-	-	-	27,301,085
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	257,507	215,541	(29,091)	(419,880)	(394,029)	(904,385)	339,393	77,952	(426,227)	-	-	-	(1,283,219)
Ending Surplus / (Deficit)	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	3,677,147	4,016,540	4,094,492	3,668,265	-	-	-	3,668,265

### Unfunded Deductible and Coinsurance Subsidy

Prior Period Surplus / (Deficit)	(622,532)	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(1,100,223)	(1,181,847)	(1,281,314)	-	-	-	(622,532)
Monthly Change	(72,223)	(91,221)	(20,814)	(66,653)	(118,293)	(108,487)	(81,624)	(99,467)	(91,494)	-	-	-	(750,276)
Ending Surplus / (Deficit)	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(1,100,223)	(1,181,847)	(1,281,314)	(1,372,808)	-	-	-	(1,372,808)

Total HIRSP Retained Earnings	14,498,088	15,711,455	15,768,105	14,470,085	13,142,838	9,401,028	10,250,819	10,096,497	9,071,297	-	-	-	9,071,297
-------------------------------	------------	------------	------------	------------	------------	-----------	------------	------------	-----------	---	---	---	-----------

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.



Wisconsin Health Insurance Risk Sharing Plan  
September 30, 2005  
Calendar Year 2005

Unaudited Balance Sheet

Assets	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Cash and Cash Equivalents	43,348,568	47,057,865	53,789,890	57,009,607	48,034,750	47,991,033	44,046,067	41,252,806	48,788,689	-	-	-
Other Receivables <sup>(2)</sup>	96,643	125,560	94,016	1,742,701	1,472,644	1,234,188	629,508	448,884	767,911	-	-	-
Drug Rebates Receivable	1,246,751	1,051,895	1,282,340	1,496,835	1,344,382	1,586,548	1,816,840	1,652,849	1,894,871	-	-	-
Assessments Receivable	3,357,262	94,485	217,131	97,932	85,013	85,013	38,902,416	30,923,047	27,539,749	-	-	-
Prepaid Items	52,878	42,291	17,188	1,280	-	-	-	-	-	-	-	-
<b>Total Assets</b>	<b>48,102,102</b>	<b>48,372,096</b>	<b>55,400,565</b>	<b>60,348,355</b>	<b>50,936,789</b>	<b>50,896,782</b>	<b>85,394,831</b>	<b>74,277,586</b>	<b>78,991,220</b>	<b>-</b>	<b>-</b>	<b>-</b>
Liabilities and Fund Equity												
Liabilities:												
Unpaid Medical loss Liabilities	17,498,548	16,751,485	18,285,381	21,908,176	21,560,577	20,085,992	20,350,824	19,170,425	20,550,019	-	-	-
Unpaid Prescription Drug Loss Liabilities	2,456,132	2,572,946	965,110	2,584,048	2,863,469	3,033,333	2,904,436	2,491,878	2,722,729	-	-	-
Unpaid Loss Adjustment Expense	660,000	660,000	660,000	660,000	660,000	660,000	660,000	660,000	660,000	-	-	-
Unearned Premiums	12,599,991	7,023,489	16,764,621	14,630,761	9,063,254	17,186,962	15,112,758	9,058,807	16,354,912	-	-	-
Unearned Assessments	2,260	5,010,790	2,537,883	5,432,699	2,716,349	-	35,639,168	32,403,320	29,163,396	-	-	-
Accounts Payable and Other Accrued Liabilities	387,083	641,931	419,465	662,586	930,302	529,467	476,826	396,659	468,867	-	-	-
<b>Total Liabilities</b>	<b>33,604,014</b>	<b>32,660,641</b>	<b>39,632,460</b>	<b>45,878,270</b>	<b>37,793,951</b>	<b>41,495,754</b>	<b>75,144,012</b>	<b>64,181,089</b>	<b>69,919,923</b>	<b>-</b>	<b>-</b>	<b>-</b>
Fund Equity:												
Policyholder	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	9,542,625	10,556,803	11,377,215	11,148,262	-	-	-
Providers	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	(2,718,521)	(3,140,677)	(4,093,896)	(4,372,422)	-	-	-
Insurers	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	3,677,147	4,016,540	4,094,492	3,668,265	-	-	-
Unfunded Deductible and Coinsurance Subsidy	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	(1,100,223)	(1,181,847)	(1,281,314)	(1,372,808)	-	-	-
<b>Total Retained Earnings</b>	<b>14,498,088</b>	<b>15,711,455</b>	<b>15,768,105</b>	<b>14,470,085</b>	<b>13,142,838</b>	<b>9,401,028</b>	<b>10,250,819</b>	<b>10,096,497</b>	<b>9,071,297</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total Liabilities and Fund Equity</b>	<b>48,102,102</b>	<b>48,372,096</b>	<b>55,400,565</b>	<b>60,348,355</b>	<b>50,936,789</b>	<b>50,896,782</b>	<b>85,394,831</b>	<b>74,277,586</b>	<b>78,991,220</b>	<b>-</b>	<b>-</b>	<b>-</b>

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN**

**EARNED PREMIUM**

**FISCAL YEAR 2006**

<b>EARNED PREMIUM</b>	
<b>MONTH</b>	<b>FY 06</b>
JUL	8,474,728
AUG	9,012,618
SEP	9,504,746
OCT	
NOV	
DEC	
JAN	
FEB	
MAR	
APR	
MAY	
JUN	
<b>TOTAL</b>	<b>\$ 26,992,092</b>

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

## Wisconsin Health Insurance Risk Sharing Plan

Assessment Status  
As of September 30, 2005

**Prior Fiscal Assessments Receivable Balance:** \$ 521.72

**Fiscal Year 2006 Assessment Amount:** \$ 38,883,169.06

Less: Payments Received

2005 07 0.00

2005 08 (7,983,385.56)

2005 09 (3,360,556.48)

Current Year Total \$ 27,539,227.02

**Total Assessments Receivable Balance:** \$ 27,539,748.74

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## *Monthly Applicant Activity For September 2005*

Number of Applications Pending	August	367
Number of Applications Received	September	713
Number of Applications Rejected	September	127
Number of Applications Closed	September	78
Number of Applications Pending	September	510
Number of Applications Approved	September	365

### **Detail of Applications Rejected**

Eligible for Group Health Coverage	10
Current Medicaid Coverage	0
Not a Wisconsin Resident	2
Did not Qualify for lost Employer Coverage	6
65 or Older	1
Previous HIRSP < 12 Months Ago	3
Currently Covered by Other Insurance	53
No Medical Reason	52
Insufficient Premium Submitted	0
Total	127

### **Detail of Applications Closed**

Applicant Request	11
Proper Eligibility Requested, never received	8
Application Data Requested, never received	59
Total	78

Due to a programming error, the pending application numbers in this report are overstated.

# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Monthly Applicant Activity

September, 2005

A.	Medicare Eligible	6
B.	HIV +	5
C.	Eligible Individual	162
D.	Letter of Medical Eligibility	192
1.	Letter of Rejection By:	
	American Family	13
	American Medical Security Group	7
	American Republic	1
	Atrium Health Plan	1
	Blue Cross & Blue Shield United of Wisconsin	36
	Dean Health Plan	2
	Fortis Benefits Insurance	23
	Golden Rule Insurance Company	7
	Humana Insurance Company	31
	John Alden Life Insurance	2
	Mega Life and Health Insurance	15
	Mid-West National Life Insurance Company of	3
	Midwest Security Life Insurance	6
	Pekin Life Insurance	2
	Security Health Plan	5
	Unity Health Plan	1
	Wisconsin Physicians Service Insurance	26
	World Insurance	4
3.	Notice of Premium increase due to a Health Reason	0
2.	Notice of Benefit Reduction	7
3.	Notice of Premium increase due to a Health Reason	0
Total		365

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Restated Monthly Enrollment Through September 2005 Month End

	Total Subsidy				Total Non-Subsidy					Combined Total			
	Plan 1A	Plan 2	Total		Plan 1A	Plan 1B	Plan 2	Total		Plan 1A	Plan 1B	Plan 2	Total
October 2004	3,001	762	3,763		5,120	8,474	960	14,554		8,121	8,474	1,722	18,317
November 2004	2,989	765	3,754		5,141	8,508	964	14,613		8,130	8,508	1,729	18,367
December 2004	3,007	762	3,769		5,147	8,586	958	14,691		8,154	8,586	1,720	18,460
January 2005	2,960	743	3,703		4,713	9,135	955	14,803		7,673	9,135	1,698	18,506
February 2005	2,956	741	3,697		4,755	9,226	961	14,942		7,711	9,226	1,702	18,639
March 2005	2,969	739	3,708		4,827	9,361	960	15,148		7,796	9,361	1,699	18,856
April 2005	2,956	742	3,698		4,821	9,370	962	15,153		7,777	9,370	1,704	18,851
May 2005	2,958	736	3,694		4,882	9,482	962	15,326		7,840	9,482	1,698	19,020
June 2005	2,979	736	3,715		4,947	9,640	972	15,559		7,926	9,640	1,708	19,274
July 2005	2,716	706	3,422		5,060	9,553	1,002	15,615		7,776	9,553	1,708	19,037
August 2005	2,744	699	3,443		5,035	9,637	984	15,656		7,779	9,637	1,683	19,099
September 2005	2,757	691	3,448		4,986	9,659	957	15,602		7,743	9,659	1,648	19,050

## Detail of Total Subsidy Policies in Force as of September Month End

	Level 0	Level 1	Level 2	Level 3	Level 4	Level 5	Total
October 2004	14,554	553	546	677	1,424	563	18,317
November 2004	14,613	553	539	679	1,428	555	18,367
December 2004	14,691	554	541	686	1,432	556	18,460
January 2005	14,803	529	526	676	1,451	521	18,506
February 2005	14,942	520	523	678	1,461	515	18,639
March 2005	15,148	520	523	682	1,471	512	18,856
April 2005	15,153	516	516	687	1,477	502	18,851
May 2005	15,326	516	511	686	1,481	500	19,020
June 2005	15,559	515	513	694	1,493	500	19,274
July 2005	15,615	431	474	662	1,360	495	19,037
August 2005	15,656	433	478	655	1,381	496	19,099
September 2005	15,602	432	477	650	1,395	494	19,050

Level 0 = Income > \$25,000

Level 1 = Income \$17,000-\$19,999

Level 2 = Income \$14,000-\$16,999

Level 3 = Income \$10,000-\$13,999

Level 4 = Income < or equal to \$9,999

Level 5 = Income \$20,000-\$24,999

**\* Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Total Policies in Force by Plan, Gender and Age Group as of September 2005 Month End

### Male

Plan	Gender	Age Group	Number of Policyholders
1A	Male	0-24	438
1A	Male	25-29	242
1A	Male	30-34	172
1A	Male	35-39	259
1A	Male	40-44	407
1A	Male	45-49	488
1A	Male	50-54	541
1A	Male	55-59	467
1A	Male	60-64	447
1A	Male	65+	6
		Total	3,467

Plan	Gender	Age Group	Number of Policyholders
1B	Male	0-24	293
1B	Male	25-29	72
1B	Male	30-34	85
1B	Male	35-39	167
1B	Male	40-44	300
1B	Male	45-49	495
1B	Male	50-54	678
1B	Male	55-59	886
1B	Male	60-64	1,363
1B	Male	65+	12
		Total	4,351

Plan	Gender	Age Group	Number of Policyholders
2	Male	0-24	4
2	Male	25-29	11
2	Male	30-34	14
2	Male	35-39	33
2	Male	40-44	71
2	Male	45-49	103
2	Male	50-54	124
2	Male	55-59	107
2	Male	60-64	88
2	Male	65+	125
		Total	680

### Female

Plan	Gender	Age Group	Number of Policyholders
1A	Female	0-24	400
1A	Female	25-29	209
1A	Female	30-34	203
1A	Female	35-39	244
1A	Female	40-44	347
1A	Female	45-49	471
1A	Female	50-54	607
1A	Female	55-59	777
1A	Female	60-64	1,003
1A	Female	65+	15
		Total	4,276

Plan	Gender	Age Group	Number of Policyholders
1B	Female	0-24	181
1B	Female	25-29	60
1B	Female	30-34	77
1B	Female	35-39	159
1B	Female	40-44	294
1B	Female	45-49	501
1B	Female	50-54	737
1B	Female	55-59	1,219
1B	Female	60-64	2,062
1B	Female	65+	18
		Total	5,308

Plan	Gender	Age Group	Number of Policyholders
2	Female	0-24	3
2	Female	25-29	2
2	Female	30-34	21
2	Female	35-39	27
2	Female	40-44	63
2	Female	45-49	97
2	Female	50-54	126
2	Female	55-59	156
2	Female	60-64	167
2	Female	65+	306
		Total	968

\* Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Total Policies in Force by Plan, Gender, Zone and Age Group as of September 2005 Month End

### Male

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	1	Male	0-24	28
1A	1	Male	25-29	22
1A	1	Male	30-34	15
1A	1	Male	35-39	35
1A	1	Male	40-44	42
1A	1	Male	45-49	47
1A	1	Male	50-54	47
1A	1	Male	55-59	35
1A	1	Male	60-64	32
1A	1	Male	65+	1
Total				304

### Female

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	1	Female	0-24	28
1A	1	Female	25-29	25
1A	1	Female	30-34	22
1A	1	Female	35-39	16
1A	1	Female	40-44	28
1A	1	Female	45-49	33
1A	1	Female	50-54	51
1A	1	Female	55-59	76
1A	1	Female	60-64	76
1A	1	Female	65+	1
Total				356

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	2	Male	0-24	136
1A	2	Male	25-29	78
1A	2	Male	30-34	59
1A	2	Male	35-39	78
1A	2	Male	40-44	117
1A	2	Male	45-49	139
1A	2	Male	50-54	145
1A	2	Male	55-59	130
1A	2	Male	60-64	114
1A	2	Male	65+	2
Total				998

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	2	Female	0-24	139
1A	2	Female	25-29	61
1A	2	Female	30-34	66
1A	2	Female	35-39	81
1A	2	Female	40-44	108
1A	2	Female	45-49	143
1A	2	Female	50-54	177
1A	2	Female	55-59	197
1A	2	Female	60-64	291
1A	2	Female	65+	4
Total				1,267

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	3	Male	0-24	274
1A	3	Male	25-29	142
1A	3	Male	30-34	98
1A	3	Male	35-39	146
1A	3	Male	40-44	248
1A	3	Male	45-49	302
1A	3	Male	50-54	349
1A	3	Male	55-59	302
1A	3	Male	60-64	301
1A	3	Male	65+	3
Total				2,165

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	3	Female	0-24	233
1A	3	Female	25-29	123
1A	3	Female	30-34	115
1A	3	Female	35-39	147
1A	3	Female	40-44	211
1A	3	Female	45-49	295
1A	3	Female	50-54	379
1A	3	Female	55-59	504
1A	3	Female	60-64	636
1A	3	Female	65+	10
Total				2,653

**\* Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.



# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Total Policies in Force by Plan, Gender, Zone and Age Group as of September 2005 Month End

### Male

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	1	Male	0-24	16
1B	1	Male	25-29	9
1B	1	Male	30-34	12
1B	1	Male	35-39	20
1B	1	Male	40-44	29
1B	1	Male	45-49	29
1B	1	Male	50-54	43
1B	1	Male	55-59	62
1B	1	Male	60-64	79
1B	1	Male	65+	1
			Total	300

### Female

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	1	Female	0-24	13
1B	1	Female	25-29	8
1B	1	Female	30-34	10
1B	1	Female	35-39	4
1B	1	Female	40-44	17
1B	1	Female	45-49	29
1B	1	Female	50-54	38
1B	1	Female	55-59	76
1B	1	Female	60-64	132
1B	1	Female	65+	2
			Total	329

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	2	Male	0-24	88
1B	2	Male	25-29	19
1B	2	Male	30-34	31
1B	2	Male	35-39	54
1B	2	Male	40-44	80
1B	2	Male	45-49	149
1B	2	Male	50-54	205
1B	2	Male	55-59	230
1B	2	Male	60-64	376
1B	2	Male	65+	1
			Total	1,233

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	2	Female	0-24	60
1B	2	Female	25-29	20
1B	2	Female	30-34	25
1B	2	Female	35-39	62
1B	2	Female	40-44	87
1B	2	Female	45-49	162
1B	2	Female	50-54	237
1B	2	Female	55-59	379
1B	2	Female	60-64	598
1B	2	Female	65+	5
			Total	1,635

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	3	Male	0-24	189
1B	3	Male	25-29	44
1B	3	Male	30-34	42
1B	3	Male	35-39	93
1B	3	Male	40-44	191
1B	3	Male	45-49	317
1B	3	Male	50-54	430
1B	3	Male	55-59	594
1B	3	Male	60-64	908
1B	3	Male	65+	10
			Total	2,818

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	3	Female	0-24	108
1B	3	Female	25-29	32
1B	3	Female	30-34	42
1B	3	Female	35-39	93
1B	3	Female	40-44	190
1B	3	Female	45-49	310
1B	3	Female	50-54	462
1B	3	Female	55-59	764
1B	3	Female	60-64	1,332
1B	3	Female	65+	11
			Total	3,344

**\* Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Total Policies in Force by Plan, Gender, Zone and Age Group as of September 2005 Month End

### Male

Plan	Zone	Gender	Age Group	Number of Policyholders
2	1	Male	0-24	0
2	1	Male	25-29	1
2	1	Male	30-34	3
2	1	Male	35-39	7
2	1	Male	40-44	10
2	1	Male	45-49	17
2	1	Male	50-54	17
2	1	Male	55-59	15
2	1	Male	60-64	8
2	1	Male	65+	9
			Total	87

Plan	Zone	Gender	Age Group	Number of Policyholders
2	2	Male	0-24	1
2	2	Male	25-29	3
2	2	Male	30-34	7
2	2	Male	35-39	10
2	2	Male	40-44	20
2	2	Male	45-49	32
2	2	Male	50-54	35
2	2	Male	55-59	21
2	2	Male	60-64	30
2	2	Male	65+	38
			Total	197

Plan	Zone	Gender	Age Group	Number of Policyholders
2	3	Male	0-24	3
2	3	Male	25-29	7
2	3	Male	30-34	4
2	3	Male	35-39	16
2	3	Male	40-44	41
2	3	Male	45-49	54
2	3	Male	50-54	72
2	3	Male	55-59	71
2	3	Male	60-64	50
2	3	Male	65+	78
			Total	396

### Female

Plan	Zone	Gender	Age Group	Number of Policyholders
2	1	Female	0-24	0
2	1	Female	25-29	0
2	1	Female	30-34	4
2	1	Female	35-39	1
2	1	Female	40-44	8
2	1	Female	45-49	11
2	1	Female	50-54	17
2	1	Female	55-59	13
2	1	Female	60-64	11
2	1	Female	65+	25
			Total	90

Plan	Zone	Gender	Age Group	Number of Policyholders
2	2	Female	0-24	1
2	2	Female	25-29	0
2	2	Female	30-34	10
2	2	Female	35-39	10
2	2	Female	40-44	23
2	2	Female	45-49	30
2	2	Female	50-54	36
2	2	Female	55-59	53
2	2	Female	60-64	46
2	2	Female	65+	94
			Total	303

Plan	Zone	Gender	Age Group	Number of Policyholders
2	3	Female	0-24	2
2	3	Female	25-29	2
2	3	Female	30-34	7
2	3	Female	35-39	16
2	3	Female	40-44	32
2	3	Female	45-49	56
2	3	Female	50-54	73
2	3	Female	55-59	90
2	3	Female	60-64	110
2	3	Female	65+	187
			Total	575

**\* Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Total Subsidy/Non-Subsidy Restated for September 2005 Month End

Plan			Number of Policyholders
1A	Non-subsidized		4,986
1A	Subsidized		2,757
1B	Non-subsidized		9,659
2	Non-subsidized		957
2	Subsidized		691
Total			19,050

## Total Subsidy by Level

Subsidy Level	Number of Policyholders
Level 0	15,602
Level 1	432
Level 2	477
Level 3	650
Level 4	1,395
Level 5	494
Total	19,050

	Number of Policyholders
Plan 1A, Zone 1, Non-Subsidized	371
Plan 1A, Zone 1, Subsidized	289
Plan 1A, Zone 2, Non-Subsidized	1,509
Plan 1A, Zone 2, Subsidized	756
Plan 1A, Zone 3, Non-Subsidized	3,106
Plan 1A, Zone 3, Subsidized	1,712
Plan 1B, Zone 1, Non-Subsidized	629
Plan 1B, Zone 2, Non-Subsidized	2,868
Plan 1B, Zone 3, Non-Subsidized	6,162
Plan 2, Zone 1, Non-Subsidized	84
Plan 2, Zone 1, Subsidized	93
Plan 2, Zone 2, Non-Subsidized	291
Plan 2, Zone 2, Subsidized	209
Plan 2, Zone 3, Non-Subsidized	582
Plan 2, Zone 3, Subsidized	389
Total	19,050

**\* Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

# Wisconsin Health Insurance Risk Sharing Plan

## Monthly Service Report

For: September, 2005

### Customer Service/Policyholder Services

Week Ending	Calls Offered	Calls Handled	# Abandoned	% Abandoned	Average Wait (ASA)*	Longest Wait	Average Talk	Service Level**
9/2/2005	2,581	2,560	21	0.80%	00:00:19	00:04:40	00:03:52	97.20%
9/9/2005	2,380	2,351	29	1.20%	00:00:24	00:05:26	00:03:49	93.80%
9/16/2005	2,903	2,879	24	0.80%	00:00:18	00:03:55	00:04:01	96.60%
9/23/2005	2,809	2,782	27	1.00%	00:00:17	00:04:26	00:03:50	97.00%

### Historical

07-2004	11,453	10,865	588	4.9 %	00:02:47	00:08:34	00:02:53	
08-2004	9,174	8,660	514	5.6 %	00:02:42	00:09:20	00:02:52	
09-2004	10,082	9,203	879	8.7 %	00:03:29	00:14:02	00:02:37	
01-2005	10,390	9,357	1,015	9.6 %	00:04:09	00:11:24	00:03:35	
02-2005	10,618	9,625	933	8.8 %	00:03:40	00:12:35	00:03:29	
03-2005	13,363	11,782	1,561	11.5 %	00:04:34	00:18:00	00:03:30	
04-2005	18,245	17,962	283	1.6 %	00:00:30	00:09:35	00:03:38	93.00%
05-2005	17,638	17,311	327	1.9 %	00:00:39	00:12:39	00:03:39	89.00%
06-2005	18,966	18,309	657	3.5 %	00:00:57	00:12:07	00:03:48	81.00%
07-2005	12,293	12,150	143	1.2 %	00:00:25	00:07:50	00:04:07	94.00%
08-2005	11,975	11,851	124	1.0 %	00:00:22	00:06:54	00:04:03	96.00%
09-2005	12,065	11,943	122	1.0 %	00:00:20	00:05:26	00:03:54	96.00%

### Medical Affairs Telephone

9/2/2005	201	195	6	3.00%	00:00:25	00:02:52	00:03:07	94.70%
9/9/2005	144	138	6	4.20%	00:00:29	00:02:21	00:03:06	94.40%
9/16/2005	187	178	9	4.80%	00:00:22	00:04:37	00:02:44	92.00%
9/23/2005	172	170	2	1.20%	00:00:24	00:02:49	00:02:47	96.00%

### PBM Telephone Results

9/2/2005	287	284	2	0.10%	00:00:03	00:01:56	00:03:56	95.70%
9/9/2005	185	184	0	0.00%	00:00:02	00:01:06	00:04:00	97.80%
9/16/2005	244	243	1	0.00%	00:00:01	00:00:59	00:04:33	99.20%
9/23/2005	226	225	1	0.10%	00:00:01	00:01:27	00:04:13	99.60%

All Time Formats are hh:mm:ss Historical Stats prior to April 1, 2005 have all been converted to the new format.

\* ASA = Average Speed of Answer

\*\* Service Level = Calls handled within 120 seconds divided by the number of calls offered.

\*\*\* Monthly totals are based on actual month end which is the last day of the month.

### Most Commonly Asked Questions to Customer Service/ Policyholder Services

- What is the status of my claim?
- What is my premium?
- What is the status of my application?

### Open Written Correspondence

Department	Beginning Inventory	Received	Completed	1 to 2 Days	3 to 5 Days	6+ Days	Ending Inventory
CUSTOMER SERVICE	12	98	102	4	2	2	8
MEDICAL AFFAIRS	0	1	1	0	0	0	0
POLICYHOLDER SERVICES*	8	82	76	14	0	0	14

\* Supplemental application documentation is no longer counted as

### First Call Resolution

Number of Calls Handled	First Call Resolved	Percent of Calls
9,305	8,718	93.69%

### Telephone and Written

Number of Days	Number of Inquires	Number Closed	Percentage
5	2263	2218	98.01%
2	2263	2186	96.60%

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN**

**CLAIMS THAT HAVE FINALIZED TO PAYMENT OR DENIAL AS OF September 2005 MONTH END (9/28/2005)**

	Sep 2004*	Oct 2004*	Nov 2004*	Dec 2004*	Jan 2005*	Feb 2005*	Mar 2005*	Apr 2005**	May 2005**	June 2005**	July 2005**	Aug 2005**	Sep 2005**
	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims
<b>Plan 1A</b>													
Pharmacy								23,720	27,571	28,761	27,037	29,298	28,184
Pharmacy Crossovers								0	0	0	0	0	0
Inpatient Hospital								71	216	379	228	282	210
Inpatient Hospital Crossovers								2	5	3	2	5	2
Outpatient Hospital								2,240	2,532	2,762	1,980	2,724	2,221
Outpatient Hospital Crossovers								21	43	23	16	16	8
Physician								8,566	16,271	15,154	11,676	14,485	12,807
Physician Crossovers								31	115	100	161	110	80
Nursing Home								13	26	44	13	35	22
Nursing Home Crossovers								0	0	0	0	0	0
Miscellaneous								1,070	3,032	2,826	1,778	2,715	2,450
Miscellaneous Crossovers								4	6	8	46	37	49
Total Plan 1A								35,738	49,817	50,060	42,937	49,707	46,033
<b>Plan 1B</b>													
Pharmacy								20,059	23,142	24,564	23,494	25,910	25,090
Pharmacy Crossovers								0	0	0	0	0	0
Inpatient Hospital								66	169	221	143	240	183
Inpatient Hospital Crossovers								1	3	2	2	2	2
Outpatient Hospital								1,698	1,903	2,174	1,519	2,165	1,750
Outpatient Hospital Crossovers								11	24	34	9	28	14
Physician								6,617	13,114	12,397	9,421	12,091	10,861
Physician Crossovers								63	55	87	67	65	43
Nursing Home								1	11	2	6	10	12
Nursing Home Crossovers								0	0	0	0	0	0
Miscellaneous								717	1,781	1,629	1,112	1,564	1,407
Miscellaneous Crossovers								1	15	15	6	8	8
Total Plan 1B								29,234	40,217	41,125	35,779	42,083	39,370
<b>Plan 2</b>													
Pharmacy								12,083	13,905	14,360	13,737	14,788	14,046
Pharmacy Crossovers								0	0	0	0	0	0
Inpatient Hospital								4	10	17	11	11	8
Inpatient Hospital Crossovers								52	103	94	62	112	81
Outpatient Hospital								155	186	141	149	174	154
Outpatient Hospital Crossovers								771	1,233	1,236	891	1,286	1,243
Physician								311	525	384	416	487	351
Physician Crossovers								3,133	6,487	5,978	5,530	6,979	5,193
Nursing Home								6	6	8	5	9	4
Nursing Home Crossovers								5	18	37	14	42	14
Miscellaneous								252	358	344	278	431	302
Miscellaneous Crossovers								622	1,315	1,417	1,033	1,738	1,675
Total Plan 2								17,394	24,146	24,016	22,126	26,057	23,071
<b>Total</b>													
Pharmacy	61,367	92,799	63,286	63,621	62,372	61,359	63,736	55,862	64,618	67,685	64,268	69,996	67,320
Pharmacy Crossovers								0	0	0	0	0	0
Inpatient Hospital	268	612	439	540	422	462	421	141	395	617	382	533	401
Inpatient Hospital Crossovers	42	99	75	71	73	96	77	55	111	99	66	119	85
Outpatient Hospital	3,571	5,386	4,145	5,705	4,027	4,448	3,164	4,093	4,621	5,077	3,648	5,063	4,125
Outpatient Hospital Crossovers	770	1,199	975	1,598	1,015	1,211	882	803	1,300	1,293	916	1,330	1,265
Physician	22,116	30,612	24,387	32,229	24,762	26,193	18,349	15,494	29,910	27,935	21,513	27,063	24,019
Physician Crossovers	3,675	5,294	3,918	6,286	4,251	4,592	2,977	3,227	6,657	6,165	5,758	7,154	5,316
Nursing Home	16	34	18	14	31	26	29	20	43	54	24	54	38
Nursing Home Crossovers	11	36	11	11	6	4	2	5	18	37	14	42	14
Miscellaneous	1,286	2,120	1,921	2,405	1,817	1,842	1,948	2,039	5,171	4,799	3,168	4,710	4,159
Miscellaneous Crossovers	0	0	0	0	0	0	0	627	1,336	1,440	1,085	1,783	1,732
Total	93,122	138,191	99,175	112,480	98,776	100,233	91,585	82,366	114,180	115,201	100,842	117,847	108,474

\* The reporting of inventory numbers before April 2005 did not include information by Plan. Previously stated numbers are now reported only in the Total section of this report.

\*\* Adjustments have been reported in the non-Crossover categories on history prior to April 2005. Adjustments are not included in any category beginning with April 2005.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN**  
**AVERAGE CLAIMS PROCESSING DAYS AS OF SEPTEMBER 2005 MONTH END (9/28/2005)**

	Sep 2004*	Oct 2004*	Nov 2004*	Dec 2004*	Jan 2005*	Feb 2005*	Mar 2005*	Apr 2005**	May 2005**	June 2005**	July 2005**	Aug 2005**	Sep 2005**
	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days	Ave # Days
<b>Plan 1A</b>													
Inpatient Hospital								30.04	32.29	26.42	23.66	19.50	18.77
Inpatient Hospital Crossovers								37.00	23.25	21.66	24.00	11.50	0.00
Outpatient Hospital								11.96	10.73	8.44	7.28	6.41	3.31
Outpatient Hospital Crossovers								25.00	23.45	24.68	16.35	12.57	11.28
Professional								20.39	16.04	10.11	9.65	7.19	4.54
Professional Crossovers								23.86	18.75	14.14	12.20	13.76	8.15
Nursing Home								13.88	27.53	14.52	27.28	19.00	15.80
Nursing Home Crossovers								0.00	0.00	0.00	0.00	0.00	0.00
Miscellaneous								23.20	21.24	17.48	17.06	12.51	8.12
Miscellaneous Crossovers								36.75	24.60	29.00	22.33	29.16	8.07
								19.09	16.19	11.02	10.33	7.94	4.92
<b>Plan 1B</b>													
Inpatient Hospital								27.56	29.74	27.46	25.59	19.78	21.26
Inpatient Hospital Crossovers								35.00	19.66	16.00	18.00	10.00	14.00
Outpatient Hospital								12.69	10.35	8.46	8.28	6.32	3.16
Outpatient Hospital Crossovers								27.63	21.20	24.16	19.14	15.25	10.14
Professional								20.50	15.15	9.72	8.99	6.89	4.32
Professional Crossovers								22.80	22.86	14.83	11.94	15.42	9.30
Nursing Home								16.00	37.66	15.00	11.50	10.66	12.20
Nursing Home Crossovers								0.00	0.00	0.00	0.00	0.00	0.00
Miscellaneous								23.74	20.84	17.49	18.25	12.51	7.84
Miscellaneous Crossovers								11.00	23.81	14.35	18.00	12.14	9.80
Average for the Month for Plan 1B								19.33	15.29	10.42	9.78	7.48	4.59
<b>Plan 2</b>													
Inpatient Hospital								24.00	68.37	21.77	18.75	15.00	13.33
Inpatient Hospital Crossovers								29.38	19.32	19.72	22.69	15.52	10.25
Outpatient Hospital								19.54	20.59	16.63	21.66	11.52	7.58
Outpatient Hospital Crossovers								25.07	16.97	17.06	17.53	13.24	9.21
Professional								25.29	23.62	21.91	22.17	12.91	8.24
Professional Crossovers								23.33	15.34	13.11	13.54	8.47	6.05
Nursing Home								21.33	18.80	18.50	0.00	12.60	16.66
Nursing Home Crossovers								22.60	14.33	19.00	24.66	18.89	11.60
Miscellaneous								19.19	21.65	18.97	21.14	12.62	9.75
Miscellaneous Crossovers								26.35	19.21	18.73	18.37	11.50	7.70
Average for the Month for Plan 2								23.91	16.77	14.99	15.19	9.90	7.01
<b>Total</b>													
Inpatient Hospital	17.00	21.00	18.00	17.00	15.00	17.00	15.00	28.58	32.01	26.68	24.22	19.50	19.66
Inpatient Hospital Crossovers	15.00	15.00	16.00	13.00	12.00	14.00	10.00	29.75	19.48	19.70	22.55	15.31	10.34
Outpatient Hospital	14.00	14.00	13.00	13.00	11.00	12.00	12.00	12.45	10.86	8.63	8.08	6.48	3.28
Outpatient Hospital Crossovers	19.00	21.00	22.00	25.00	19.00	19.00	16.00	25.10	17.25	17.38	17.52	13.27	9.23
Professional	16.00	15.00	15.00	14.00	13.00	11.00	11.00	20.53	15.78	10.05	9.52	7.14	4.48
Professional Crossovers	15.00	17.00	17.00	17.00	13.00	12.00	13.00	23.32	15.47	13.15	13.49	8.60	6.10
Nursing Home	17.00	15.00	14.00	14.00	14.00	15.00	15.00	15.76	28.24	14.90	23.77	16.07	14.94
Nursing Home Crossovers	16.00	17.00	11.00	12.00	18.00	15.00	9.00	22.60	14.33	19.00	24.66	18.89	11.60
Miscellaneous	19.00	21.00	24.00	24.00	17.00	18.00	17.00	22.97	21.12	17.57	17.71	12.52	8.10
Miscellaneous Crossovers	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26.39	19.28	18.75	18.41	11.77	7.72
Average for the Month	16.00	16.00	***16.00	16.00	13.00	14.00	12.00	20.12	16.00	11.64	11.30	8.28	5.27

\* The reporting of average processing days before April 2005 did not include information by Plan. Previously stated numbers are now reported only in the Total section of this report.

\*\* Average processing days on claims adjustments used to be reported by the previous administrator. Average processing days will not be reported on claim adjustments beginning with April 2005. Therefore, they have not been reported in this report for any month.

\*\*\* Higher than normal claim average resulting from clean up of aged medical review claims

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN  
HIRSP CLAIMS INVENTORY AS OF SEPTEMBER 2005 MONTH END (9/28/2005)**

Pended Claims Data	Sep 2004*	Oct 2004*	Nov 2004*	Dec 2004*	Jan 2005*	Feb 2005*	Mar 2005**	Apr 2005***	May 2005***	June 2005**	July 2005**	Aug 2005**	Sep 2005**
# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims
<b>Prior to Entry</b>									1,056	1,443	1,087	747	873
<b>Total</b>									1,056	1,443	1,087	747	873
<b>Pre-System Suspend</b>													
Plan 1A								3,954	1,734	1,292	854	1,003	470
Plan 1B								2,946	1,284	926	721	859	391
Plan 2								2,318	1,035	1,420	1,066	826	305
<b>Total</b>							20,482	9,218	4,053	3,638	2,641	2,688	1,166
<b>Total Over 30 Days Old</b>								1,696	736	322	64	6	0
<b>System Pended</b>													
<b>Plan 1A</b>													
Inpatient Hospital								232	256	140	142	54	63
Inpatient Hospital Crossovers								2	2	0	0	0	1
Outpatient Hospital								759	660	519	564	144	151
Outpatient Hospital Crossovers								20	10	6	10	1	3
Professional								4,347	3,606	2,908	3,091	1,302	1,262
Professional Crossovers								46	34	35	40	7	10
Nursing Home								29	25	25	27	11	6
Nursing Home Crossovers								0	0	0	0	0	0
Miscellaneous								1,146	873	684	790	276	234
Miscellaneous Crossovers								3	2	11	3	0	0
<b>Total Plan 1A</b>								6,584	5,468	4,328	4,667	1,795	1,730
<b>Total Over 30 Days Old</b>								1,856	1,778	1,163	856	463	457
<b>Plan 1B</b>													
Inpatient Hospital								143	144	95	106	56	59
Inpatient Hospital Crossovers								2	2	1	0	0	0
Outpatient Hospital								495	517	397	429	171	152
Outpatient Hospital Crossovers								14	7	5	12	0	2
Professional								3,218	2,773	2,163	2,426	954	992
Professional Crossovers								23	26	16	26	7	13
Nursing Home								8	2	6	8	6	5
Nursing Home Crossovers								0	0	0	0	0	0
Miscellaneous								667	566	390	461	146	107
Miscellaneous Crossovers								7	2	2	1	1	4
<b>Total Plan 1B</b>								4,577	4,039	3,075	3,469	1,341	1,334
<b>Total Over 30 Days Old</b>								1,360	1,296	936	620	386	395
<b>Plan 2</b>													
Inpatient Hospital								3	1	3	5	0	2
Inpatient Hospital Crossovers								40	28	25	33	5	5
Outpatient Hospital								60	46	35	42	2	8
Outpatient Hospital Crossovers								329	252	292	275	24	46
Professional								147	87	128	141	22	16
Professional Crossovers								1,741	1,303	1,092	1,024	206	315
Nursing Home								2	3	2	1	0	0
Nursing Home Crossovers								18	19	8	21	0	4
Miscellaneous								109	101	62	68	18	13
Miscellaneous Crossovers								557	429	321	407	101	119
<b>Total Plan 2</b>								3,006	2,269	1,968	2,017	378	528
<b>Total Over 30 Days Old</b>								694	526	329	152	40	43
<b>Total</b>													
Inpatient Hospital	230	228	142	127	169	170	0	378	401	238	253	110	124
Inpatient Hospital Crossovers	19	17	7	15	22	16	0	44	32	26	33	5	6
Outpatient Hospital	1,040	1,002	963	699	969	650	0	1,314	1,223	951	1,035	317	311
Outpatient Hospital Crossovers	447	581	540	247	403	275	0	363	269	303	297	25	51
Professional	7,344	8,292	6,457	5,872	5,322	3,600	0	7,712	6,466	5,199	5,658	2,278	2,270
Professional Crossovers	1,483	1,643	1,564	580	1,190	668	0	1,810	1,363	1,143	1,090	220	338
Nursing Home	9	8	4	15	13	10	0	39	30	33	36	17	11
Nursing Home Crossovers	6	2	2	3	1	0	0	18	19	8	21	0	4
Miscellaneous	863	1,137	865	728	836	845	0	1,922	1,540	1,136	1,319	440	354
Miscellaneous Crossovers	0	0	0	0	0	0	0	567	433	334	411	102	123
<b>Total</b>	11,441	12,910	10,544	8,286	8,925	6,234	20,482	14,167	11,776	9,371	10,153	3,514	3,592
<b>Total Over 30 Days Old</b>	1,437	1,813	1,897	651	868	467	0	5,606	4,336	2,750	1,692	895	895
<b>Grand Total</b>	11,441	12,910	10,544	8,286	8,925	6,234	20,482	24,441	17,272	14,096	13,541	7,075	5,029

\* The reporting of inventory numbers before April 2005 did not include information by Plan. Previously stated numbers are now reported only in the Total section of this report.

\*\* Prior administrator claim inventory is zero due to transition of plan administration to WPS. 1,807 claims were pending and transferred to WPS on March 31st. WPS received 20,482 HIRSP claims from providers and the prior administrator during the period 3/14/2005 - 3/31/2005.

\*\*\* Claim adjustments have been reported in the non-Crossover categories on history prior to April 2005. Claim adjustments are not included in any category beginning with April 2005.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## MEDICAL CLAIMS DENIED REPORT\*

As of September 2005 Month End (9/28/2005)

Processed Month	Plan 1A		Plan 1B		Plan 2		All Plans			Denial Rate
	Paid	Denied	Paid	Denied	Paid	Denied	Paid	Denied	Total	
August 2004	11,398	4,318	7,676	3,016	3,924	1,423	22,998	8,757	31,755	27.6%
September 2004	16,461	5,752	11,535	3,880	5,751	2,013	33,747	11,645	45,392	25.7%
October 2004	12,686	4,232	9,584	3,458	4,389	1,540	26,659	9,230	35,889	25.7%
November 2004	16,889	5,819	12,715	4,376	6,458	2,602	36,062	12,797	48,859	26.2%
December 2004	12,980	4,239	9,710	3,192	4,542	1,741	27,232	9,172	36,404	25.2%
January 2005	12,985	5,197	9,862	3,935	4,884	2,011	27,731	11,143	38,874	28.7%
February 2005	9,529	3,403	7,389	2,752	3,297	1,479	20,215	7,634	27,849	27.4%
March 2005	10,223	2,143	7,789	1,678	4,185	1,109	22,197	4,930	27,127	18.2%
April 2005	18,903	4,196	14,308	3,387	7,814	2,475	41,025	10,058	51,083	19.7%
May 2005	18,296	3,908	14,232	3,010	7,388	2,385	39,916	9,303	49,219	18.9%
July 2005	13,476	3,119	10,537	2,198	6,350	2,121	30,363	7,438	37,801	19.7%
August 2005	17,126	4,083	13,743	3,027	8,691	2,787	39,560	9,897	49,457	20.0%
September 2005	15,492	3,082	12,347	2,516	6,780	2,389	34,619	7,987	42,606	18.7%

\* Claims denied by the PBM are not included. See page 30 for claims denied by the PBM.

A claim may have some paid lines and some denied lines. Therefore, a claim that has both paid and rejected lines has been counted as a paid claim and as a denied claim. This results in more total claims being reported in this report than in the report titled Claims That Have Finalized to Payment or Denial Report.

## END OF MONTH SEPTEMBER 2005 DENIAL REASON DETAIL

Denial Reason	Volume	Top 10 Reasons for Denial
18/DU	2,543	DUPLICATE CLAIM/SERVICE
23	767	CLAIM DENIED/REDUCED BECAUSE CHARGES HAVE BEEN PAID BY ANOTHER PAYER AS PART OF COORDINATION OF BENEFITS
49	710	NONCOVERED SERVICES BECAUSE THIS IS A ROUTINE EXAM OR SCREENING PROCEDURE DONE IN CONJUNCTION WITH A ROUTINE EXAM
51	589	THIS IS A PREEXISTING CONDITION. MEDICAL RECORDS OBTAINED FROM YOUR PROVIDER HAVE IDENTIFIED A PRE-EXISTING CONDITION
27/28	571	EXPENSE(S) INCURRED OUTSIDE COVERAGE PERIOD ARE NOT COVERED
EM	338	WE NEED THE MEDICARE EXPLANATION OF BENEFITS TO PROCESS THIS CHARGE
XZ	316	WE WILL COMPLETE PROCESSING OF THIS CLAIM WHEN WE RECEIVE THE REQUESTED MEDICAL RECORDS
HW	296	SERVICES PERFORMED BY A PROVIDER THAT IS NOT MEDICAID CERTIFIED ARE NOT COVERED
IS	263	THIS PROCEDURE IS INCIDENTAL TO AND CONSIDERED PART OF THE PRIMARY PROCEDURE
50	183	THESE SERVICES ARE NOT ALLOWABLE FOR BENEFIT CONSIDERATION BECAUSE THEY ARE NOT MEDICALLY NECESSARY

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.



**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN  
PHARMACY CLAIMS DENIED REPORT**

**As of September 2005 Month End (9/30/2005)\***

<b>Processed Month</b>	<b>Denied</b>
September 2004	9,048
October 2004	13,104
November 2004	8,873
December 2004	8,555
January 2005	8,664
February 2005	7,627
March 2005	8,304
April 2005	25,472
May 2005	21,252
June 2005	16,979
July 2005	18,594
August 2005	16,907
September 2005	15,659

**END OF MONTH SEPTEMBER 2005 DENIAL REASON DETAIL**

<b>Top 10 Reasons for Denial</b>	<b>Volume</b>
DUR Rejected Error-Interaction Drugs	6,462
NDC Not Covered	2,993
Plan Limitation Exceeded	2,932
Refill Too Soon	1,288
Duplicate Paid/Captured Claim	508
Missing/Invalid Dispense as Written Code	434
Filled After Coverage Terminated	349
Non-Matched Cardholder ID	142
Missing/Invalid Sex Code	106
Missing/Invalid Birth Date	88

**\* Each prescription processed and denied is counted as one claim**

**Note the different end of month date from previous reports in this packet.  
This is due to these figures being taken from a production PBM report  
rather than from the current HIRSP plan administrator's reporting files.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

# WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

## Claims Accuracy Performance September 2005

### Medical

Month	Total Number of Claims	Total of Claims Payments	Total Claim Payments Reviewed	Total Correct Payment	Accuracy Rate
October-2004	45,392	\$8,169,270.00	\$63,287.00	\$63,287.00	100.00%
November-2004	35,889	\$6,631,268.00	\$79,182.00	\$79,156.00	99.97%
December-2004	48,859	\$9,595,500.00	\$52,645.00	\$52,645.00	100.00%
January-2005	36,404	\$6,551,366.00	\$95,201.00	\$95,201.00	100.00%
February-2005	38,874	\$6,256,306.00	\$80,016.00	\$80,016.00	100.00%
March-2005	27,849	\$5,125,139.00	\$58,769.00	\$58,769.00	100.00%
April-2005	28,646	\$4,001,294.29	\$67,258.90	\$67,605.30	99.49%
May-2005	46,570	\$8,593,111.00	\$77,521.77	\$76,450.29	98.60%
June-2005	44,024	\$10,505,466.00	\$66,752.92	\$64,063.42	99.06%
July-2005	38,336	\$7,386,440.00	\$94,437.38	\$94,034.95	99.88%
August-2005	45,262	\$9,697,518.00	\$78,001.06	\$77,852.92	99.92%
September-2005	39,905	\$7,532,770.00	\$72,997.80	\$70,504.52	98.85%
<b>Quarterly Total</b>	<b>123,503</b>	<b>\$24,616,728.00</b>	<b>\$245,436.24</b>	<b>\$242,392.39</b>	<b>99.53%</b>

\* This report is prepared on a processed date basis using all dates in a calendar month versus other reports that are prepared on a schedule that uses the standard end of month processing dates. Therefore, claims data in this report will not agree with claims data on other reports.

# Wisconsin Health Insurance Risk Sharing Plan

## Appeals and Grievance

September, 2005

### Claim Appeals

Total Claim Appeals Received	40
Billing/Claim Processing	7
Drug & Drug Formulary	10
Enrollment/Eligibility Requirements	8
Not Covered Benefit	1
Not Medically Necessary	4
Plan Administration	5
Prior Authorization	5
Total Claims Reinstatements Closed	34
Claim Appeals Average Number of Days	4.8

### Grievances

Grievance Committee	
Enrollment/Eligibility Requirements	4
Not Medically Necessary	1
Plan Administration	2
Prior Authorization	1

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.